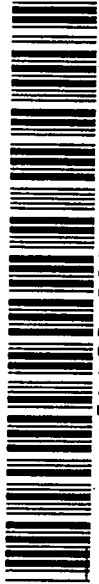


9

Mailing Label
Label 11-F July 1997

32/ 50
F02



EL497493341US

EL497493341US

DELIVERY (POSTAL USE ONLY)		Employee Signature
Delivery Attempt	Time	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Signature of Addressee or Agent		
X		
Name - Please Print		
X		

TO: (PLEASE PRINT)
Assistant Commissioner for Patents
Box CPA
Washington, DC 20231

Customer Signature
PHONE

800-222-1811 www.usps.gov

POST OFFICE
TO ADDRESSEE



EL497493341US

SEE REVERSE SIDE FOR
SERVICE GUARANTEE AND LIMITS
ON INSURANCE COVERAGE

MAR 19 2001

DATE DOCKETED

3/19/2001

Customer Copy
Label 11-F July 1997

ORIGIN (POSTAL USE ONLY)	
PO ZIP Code	Day of Delivery
32205	<input checked="" type="checkbox"/> First <input type="checkbox"/> Second
31601	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM
Mo. Day Year	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day
1915	<input type="checkbox"/> Military
Int'l Alpha Country Code	COD Fee
	Insurance Fee
Delivery	Acceptance Clerk Initials
Weekend <input type="checkbox"/> Holiday <input type="checkbox"/>	Total Postage & Fees
	\$ 12.25

STOMER USE ONLY
THOD OF PAYMENT:
Mail Corporate Acct. No. X770-785

WAIVER OF SIGNATURE (Domestic Only): Additional merchandise insurance is void if waiver of signature is requested. Delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

FROM: (PLEASE PRINT)
PHONE 713 892-3669
UNIMATION TECHNOLOGIES
5535 SAN FELIPE ST STE 1950
HOUSTON TX 77056-2746
Attn: Tammy Hodges-Law Dept.
Re. 1998U004.US

TO: (PLEASE PRINT)
PHONE
Assistant Commissioner for Patents
Box CPA
Washington, DC 20231

ESS HARD.
are making 3 copies.
FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.gov



FEE TRANSMITTAL

Note: Effective November 10, 1998.
Patent fees are subject to annual revision.

Total Amount of Payment (\$)**3,260.00**

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:

Deposit Account Number:

50-0589

Deposit Account Name:

Univation Technologies, LLC

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

FEE CALCULATION

1. FILING FEE

Large Entity Fee Code	Fee Description	Fee \$	Fee Paid
101 710	Utility filing fee		710.00
106 355	Design filing fee		
107 490	Plant filing fee		
108 710	Reissue filing fee		
114 150	Provisional filing fee		710.00

SUBTOTAL (1)

2. CLAIMS

Extra Fee from below Fee Paid
Total Claims **120** - 20 = **100** x **18** = **1,800.00**

Independent Claims **11** - 3 = **8** x **80** = **640.00**

Multiple Dependent Claims **0** x **260.00** = **.00**

Large Entity

Fee Code	Fee\$	Fee Description
103 18		Claims in excess of 20
102 78		Independent claims in excess of 3
104 260		Multiple dependent claim
109 78		Reissue independent claims over original patent
110 18		Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **3,150.00**

Complete if Known

Application Number **13,216**
Filing Date **July 10, 1998**
Inventors **Agapios K. Agapiou, et al.**
Group Art Unit **1755**
Examiner Name **M. Di Verdi**
Attorney Docket Number **1998U0004US**

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Code	Large Entity Fee \$	Fee Description	FEES PAID
105 130		Surcharge - late filing fee or oath	
127 50		Surcharge - late provisional filing or cover sheet.	
139 130		Non-English specification	
147 2,520		For filing a request for reexamination	
112 920*		Requesting publication of SIR prior to Examiner action	
113 1,840*		Requesting publication of SIR after Examiner action	
115 110		Extension for reply within first month	
116 380		Extension for reply within second month	
117 870		Extension for reply within third month	
118 1,360		Extension for reply within fourth month	
128 1,850		Extension for reply within fifth month	
119 300		Notice of Appeal	
120 300		Filing a brief in support of an appeal	
121 260		Request for oral hearing	
141 1,210		Petition to revive - unintentional	
142 1,210		Utility issue fee (or reissue)	
143 430		Design issue fee	
144 580		Plant issue fee	
122 130		Petition to the Commissioner	
123 50		Petitions related to provisional applications	
126 240		Submission of information Disclosure Stmt.	
581 40		Recording each patent assignment per property (times number of properties)	
146 710		Filing a submission after final rejection (37 CFR 1.129(a))	

EXTENSION FEE FOR REPLY WITH THIRD MONTH-- NOTE 2-MONTH PREVIOUSLY PAID FOR ON JANUARY 26, 2001, THEREFORE FEE IS \$110.00.

\$110.00

SUBTOTAL (3)

\$110.00

Typed or Printed Name

Darrell Warner

Reg. No.

36,046

Signature

Darrell Warner

Date

March 16, 2001

Deposit Account User ID

6. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. **50-0589**.

- a. ☒ Fees required under 37 C.F.R. § 1.16.
- b. ☒ Fees required under 37 C.F.R. § 1.17.
- c. ☒ Fees required under 37 C.F.R. § 1.18.

7. ☒ Other: Request For One (1)-Month Extension of Time.

8. NEW CORRESPONDENCE ADDRESS

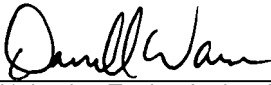
☐ Customer Number or Bar Code Label

or ☐ New correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Darrell Warner				
	Univation Technologies, LLC				
Address	Law Department				
	5555 San Felipe, Suite 1950				
City	Houston	State	Texas	Zip Code	77056
Country	U.S.A.	Telephone	(713) 892-3667	Fax	(713) 892-3687

9. SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED

Name (Print/Type)	Darrell Warner
Signature	
Company/Firm	Univation Technologies, LLC
Registration No. (Attorney/Agent)	36,046
Date	March 16, 2001